

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

May

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STATE OF HAWAII STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(Type o	r Fillit Glearly)		
PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
Matsunaga	Joel	K	(808) 546–3877	
MAILING ADDRESS (Street)			FAX	
P.O. Box 2200				
(City)	(State)	(Zip	Code)	
Honolulu	Hawaii	968	96841	
EMPLOYING ORGANIZATION	(Fill in only if you are employed by a busines	s entity which has been retained to lobby)	TELEPHONE	
Hawaiian Telcom,	Inc.		(808) 546–3877	
MAILING ADDRESS (Street)			FAX	
P.O. Box 2200				
(City)	(State)	(Zip	Code)	
Honolulu	Hawaii	. 9684	1	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaiian Telcom, Inc.	(808) 546–3877	
MAILING ADDRESS (Street)		FAX
P.O. Box 2200		
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96841
NAME OF PERSON RESPONSIBLE FOR P	REPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE
JoAnn C. Yosemori		(808) 546–3868
MAILING ADDRESS (Street)		FAX
P.O. Box 2200		(808) 546-8500
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96841

PART	<b>III</b> DESCRIPTION O	F SUBJECTS UPON WHICH	H YOU EXPECT TO LOBBY		
	Agriculture	Education	Human Services	Science, Technology & Economic Development	
X	Communications & Public Utilities	X Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
X	Consumer Protection & Commerce	Hawaiian Affairs	X Labor & Employment	Transportation	
	Culture, Arts, Historic Preservation	Health	Y Planning, Land & Water Use Management	X Other: (indicate below) Telecommunications	
X	Ecology, Energy Environmental Protection	Housing	X Public Safety & Corrections		
	<del></del>				
PART	IV CERTIFICATION	OF LOBBYIST		<del></del>	
			s, to the best of my knowledge, o	orrect and complete	
	1		s, to the best of my knowledge, t	orrect and complete.	
	tolk:		1/25/06		
	7 /	(Signature of Lobbyist)	(D	ate)	
PART	V AUTHORIZATION	TO LOBBY			
PART NAME	V AUTHORIZATION	TO LOBBY	TITLE OF AUTHORIZING OFFICER	OR PERSON REPRESENTED	
NAME	V AUTHORIZATION	I TO LOBBY	TITLE OF AUTHORIZING OFFICER Chief Executive Office		
NAME M			Chief Executive Offic		
NAME O	Michael S. Ruley	icable)	Chief Executive Offic	er 	
NAME O	Michael S. Ruley  OF ORGANIZATION (if appli	icable)	Chief Executive Offic	er EPHONE 08) 546-7844	
NAME O	Michael S. Ruley OF ORGANIZATION (if appli Hawaiian Telcom, I	icable)	Chief Executive Offic	er EPHONE 08) 546-7844	
NAME OF THE PROPERTY OF THE PR	Michael S. Ruley  OF ORGANIZATION (if appli  Hawaiian Telcom, I  G ADDRESS (Street)	icable)	Chief Executive Offic	er EPHONE 08) 546-7844	
NAME OF THE PROPERTY OF THE PR	Michael S. Ruley  OF ORGANIZATION (if appli Hawaiian Telcom, I G ADDRESS (Street)  P.O. Box 2200  City)  Honolulu	icable) nc. (State) Hawaii	Chief Executive Office TEL (8 FAX (Zip Code) 96841	er EPHONE 08) 546-7844	
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